



## ADMINISTRATIVE MANUAL

<b>SUBJECT:</b> RULES OF PERSONAL CONDUCT AND RESPONSIBILITY Code of Conduct – Confidential Information	<i>Chapter:</i> 11
	<i>Section:</i> 11.6
<b>REFERENCES:</b> Health Insurance Portability and Accountability Act of 1996 (HIPPA)	<i>Page:</i> 1 of 6
	<i>Revised:</i>

### CODE OF CONDUCT – CONFIDENTIAL INFORMATION

#### I. PURPOSE:

Employees in the Department of Health and Senior Services (DHSS) and employees of DHSS contractors often have access to information and records that identify individual employees, clients, patients, registrants, or services.

The purpose of this policy is to assure the confidentiality of information that identifies or can be readily used to identify individuals. Also, it is to assure that DHSS employees, and all others with potential access to confidential information, are knowledgeable of the Health Insurance Portability Act (HIPAA). HIPAA is defined throughout the policy as the federal Standards for Privacy of Individually Identifiable Health Information (45 CFR Parts 160 and 164). DHSS employees and all others with potential access to confidential information should be knowledgeable of HIPAA as it relates specifically to their responsibilities.

#### II. SCOPE:

Departmentwide.

#### III. POLICY:

Responsibility for maintaining confidentiality of information:

##### A. New Employees:

Each new employee will sign a confidentiality statement (Attachment A) prior to beginning his or her new position and affirm their receipt of a copy of the confidentiality policies. All new employees will be provided a general overview of the federal Standards for Privacy of Individually Identifiable Health Information (45 CFR Parts 160 and 164) during the new employee orientation. Attendance at this orientation will be documented in the employee's training file along with a copy of the signed confidentiality statement in their permanent personnel file.



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## B. Management, Bureau Chief and Above:

1. All management will participate in a general overview of the federal Standards for Privacy of Individually Identifiable Health Information (45 CFR 160 and 164). Managers responsible for activities or employees with activities covered by this federal law shall participate in more detailed initial and ongoing training.
2. It is management's responsibility to provide the resources necessary to help ensure employees are adequately informed of the importance of confidentiality, compliance to policies, and penalties for non-compliance.
3. It is management's responsibility to assure supervisors have reviewed and made staff under their supervision aware of confidentiality issues and policies.
4. It is management's responsibility to assist supervisors in determining areas under their supervision impacted by the federal Standards for Privacy of Individually Identifiable Health Information (45 CFR 160 and 164).
5. It is management's responsibility to review and respond in a timely manner to confidentiality incidents. All suspected or known breaches of the policy shall be reported both verbally and in writing, as soon as they are identified, to the Department's Privacy Officer, Office of General Counsel.
6. It is management's responsibility to periodically review DHSS confidentiality policies and recommend improvements where identified.

## C. Supervisors:

1. It is the supervisor's responsibility to provide each staff member, immediately upon entry into a position under their supervision, with instructions necessary to assist the staff member in developing an understanding of confidentiality issues and the importance of compliance to policies.



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2. It is the supervisor's responsibility to provide each staff member instructions as to the impact of the federal Standards for Privacy of Individually Identifiable Health Information (45 CFR Parts 160 and 164) on the information received, accessed and/or processed by the employee.
3. It is the supervisor's responsibility to assure each employee with responsibilities requiring access to information considered covered by the federal Standards for Privacy of Individually Identifiable Health Information (45 CFR 160 and 164) are provided specific information about the law at a minimum of annually.
4. It is the supervisor's responsibility to provide copies of the confidentiality policies and to review any changes with the employees under their supervision at the time of their annual review. This includes specifically addressing any changes to the federal laws as they affect the employee's position.
5. It is the supervisor's responsibility to review and document that all staff under their supervision have been made aware of and professes understanding of confidentiality issues and their responsibility to adhere to the confidentiality policies.
6. It is the supervisor's responsibility to report both verbally and in writing all policy violations and suspected violations to management as soon as they are identified.

**D. Employees:**

1. Interns, contractors or volunteers, whether paid or unpaid, shall be considered as employees with respect to the confidentiality policies.
2. It is the responsibility of all DHSS employees to assure the confidentiality and security of all information. Access to information or records shall be limited to those having an official need in order to perform their duties. All employees shall follow the policies on sharing of information or records with other agencies or individuals outside the Department. DHSS employees shall follow the policies on complying with and completing an



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Authorization for Disclosure of Consumer Medical/Health Information. Questions regarding routine requests for access to or release of information shall be referred to the employee's supervisor. For non-routine releases, a request for a legal opinion on release of information shall be submitted through administrative channels to the Department's Privacy Officer, Office of General Counsel. Requests may be sent directly to the Privacy Officer in situations requiring an immediate opinion.

3. Each DHSS employee shall be provided a copy of the DHSS confidentiality policies and required to sign a statement certifying knowledge of and agreement to comply with these policies. This statement shall be signed at the time of initial employment and renewed at least annually thereafter at the time of the employee's performance review. The employee shall receive a copy of each signed statement. A copy of the initial signed statement shall be filed in the employee's official personnel file. Subsequent signed statements shall be filed in the employee's unit personnel file.
4. Employees working in positions with responsibilities requiring access to information that is considered covered by the federal Standards for Privacy of Individually Identifiable Health Information (45 CFR 160 and 164) shall review the requirements of the law as defined by the Department at the time of their annual review. The employee shall sign a statement stating they have been informed of the Department's privacy policies specific to the federal privacy law. The signed statement shall be filed in the employing unit's personnel file.
5. An employee revealing confidential information to unauthorized agencies or individuals shall be subject to disciplinary actions. These actions may include release from employment, depending on the severity, and, when in violation of applicable state and federal laws, may be subject to fine and/or imprisonment. An individual whose employment terminates with the Department and reveals confidential information acquired as an employee shall be subject to legal action.



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6. It is the employee's responsibility to report policy violations or suspected violations to management as soon as the employee is aware of them. These reports should be in writing after making management aware of them verbally.

E. Contractors:

There shall be a clause in each contract that the contractor and the contractor's employees shall maintain strict confidentiality of all patient or client information or records supplied to it by the Department or obtained as a result of contract activities. This clause shall include a statement to the effect that contractors shall be compliant with the requirements of the federal Standards for Privacy of Individually Identifiable Health Information (45 CFR 160 and 164). There shall be a clause in each contract that the contracting agency assumes liability for all disclosures of confidential information by the contractor and/or the contractor's employees.

F. Researchers:

Individuals granted access to Department records for research purposes shall include in the research protocol methods and assurances for maintaining confidentiality of information that identifies individuals. These assurances should include a statement that information that specifically identifies a client will not be subsequently disclosed without written permission of the Department. All research projects involving access to individually identified health information shall include in the research protocol how they will meet the requirements specified in the federal Standards for Privacy of Individually Identifiable Health Information (45 CFR 160 and 164). Researchers shall comply with DHSS Institutional Review Board policies. Researchers shall be required to sign a statement certifying knowledge of and agreement to comply with the DHSS confidentiality policies.

G. Volunteers:

All volunteers shall sign a statement certifying knowledge of and agreement to comply with the DHSS confidentiality policies. Individuals allowed access to



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Department information covered under the federal Standards for Privacy of Individually Identifiable Health Information (45 CFR 160 and 164) must receive orientation to the requirements of the law as it relates to their activities.

### H. Penalties:

Breach of confidentiality or unauthorized destruction of confidential information/records shall result in disciplinary actions. These actions may include dismissal, depending on the severity of the offense, and possible legal action.

Prepared By:

Approved By:

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Chief, Office of Human Resources

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Deputy Department Director

**MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES (DHSS)  
STATEMENT OF AGREEMENT TO MAINTAIN CONFIDENTIALITY OF RECORDS AND  
INFORMATION IN ACCORDANCE WITH DHSS POLICIES**

**Code of Conduct**

Interns, contractors or volunteers working under supervision of DHSS employees, whether paid or unpaid, shall be considered as employees with respect to the DHSS confidentiality policies. All information that identifies or can be used to readily identify individuals shall be considered confidential. All employees shall follow the DHSS policies for sharing of confidential information. Information specifically covered by the federal Standard for Privacy of Individually Identifiable Health Information (45 CFR 160 and 164) shall be determined and employees with responsibilities requiring access to the information identified. These employees shall attend expanded training and comply with DHSS policies relating to the federal laws.

***Employees***

As a DHSS employee, I agree to be knowledgeable of and comply with DHSS confidentiality policies. Specifically I agree to:

- ✓ Assure the confidentiality and security of all information by limiting access to those having an official need in order to perform their duties;
- ✓ Restrict disclosure of confidential information to other agencies or individuals outside of DHSS. Disclosures shall be made in accordance with DHSS policies governing disclosures;
- ✓ Refrain from disclosing confidential personnel information to any individual or entity who does not have a business-related reason to receive such information.
- ✓ Participate in training, as needed, on the federal Privacy law;
- ✓ Make appropriate staff aware of potential DHSS confidentiality policy violations; and
- ✓ Sign an annual statement affirming agreement to comply with DHSS confidentiality policies.

***Contractors***

As a DHSS contractor, I agree to maintain strict confidentiality of all information that identifies or can be readily used to identify individuals that I have been provided access to by the DHSS or obtained as a result of contract activities. I understand there are potential legal penalties for breaches of confidentiality or unauthorized destruction of confidential information/records. I understand that the contracting agency assumes liability for all disclosures of confidential information by the contractor and/or the contractor's employee.

***Researchers***

As a researcher being granted access to DHSS information and data for research purposes, I agree to comply with DHSS confidentiality policies. I agree to maintain the confidentiality of information that identifies individuals. I also agree not to subsequently disclose confidential information without written permission of the Department and/or individual person. For research projects requiring access to information covered under the federal Standard for Privacy of Individually Identifiable Health Information (45 CFR 160 and 164), I agree to comply with the federal requirements.

***Volunteers***

As a volunteer, paid or unpaid, I agree to comply with the DHSS confidentiality policies. I understand that I am liable for all breaches of confidentiality and may be subject to possible legal actions.

## **MAINTAINING CONFIDENTIALITY OF INFORMATION IN THE WORK ENVIRONMENT:**

I agree to the following:

### ***Work Areas***

To remove information of a confidential nature from public view (placed inside a desk or file) when away from my work station and another authorized employee is not available to assure security of the information.

To place information of a confidential nature in locked files or other secure places when my office or work unit is closed or left unattended.

To shred or otherwise destroy information to be discarded that identifies an individual, such as poor quality copies or purged file materials.

### ***Information Exchange***

To not release confidential personnel information as obtained in the performance of duties to individuals or entities who do not have a business-related reason to receive such information.

To destroy informal records of telephone conversations containing information of a confidential nature unless the records are placed in official files.

To hold conferences and informal conversations in a manner to avoid discussions, of a confidential nature, being overheard by others.

To seal all documents containing information of a confidential nature inside an envelope addressed to a specific office or individual and marked "CONFIDENTIAL" when using conventional mail to send to other individuals, programs or agencies having an official need for the information.

To use a cover page containing a confidentiality statement approved by the DHSS Privacy Officer for all documents of a confidential nature transmitted by FAX machine to agencies and individuals with an official need to know.

To alert the receiver that the information is being transmitted via FAX and request immediate retrieval.

To include the DHSS approved statement of confidentiality on all electronic mail messages.

To not send confidential individually identifiable health information using electronic mail unless technology such as encryption or other technology is employed.

### ***Computers***

To comply with policies and procedures relating to maintaining security and confidentiality of computer data.

To position my computer workstation screen to limit visualization by other employees or visitors.

To protect my sign on and passwords to prevent others from using them.

To logout of the network when away from my work area for an extended period; for short periods of inactivity, I will activate a password protected screen saver.

### ***Penalties***

I have been informed and understand that a breach of confidentiality or unauthorized destruction of confidential records shall result in disciplinary action up to and including dismissal depending on the severity of the offense and possibly legal action.

## **CERTIFICATION:**

**This is to certify that I have read and agree to comply with the provisions of the Department's policies.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Please print name: \_\_\_\_\_

**NOTE: A copy of the initial signed statement shall be filed in the employee's official personnel file. Subsequent signed statements shall be filed in the employee's unit personnel file.**



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### CONFIDENTIAL RECORDS AND INFORMATION – WORK ENVIRONMENT

#### I. PURPOSE:

Employees in the Department of Health and Senior Services (DHSS) and employees of DHSS contractors often have access to information and records that identify individual employees, clients, patients, registrants, or other recipients of services.

The purpose of this policy is to assure the confidentiality of information, as it exists in the workplace environment.

#### II. SCOPE:

Departmentwide

#### III. POLICY:

##### A. Precautions for maintaining confidentiality of information:

##### 1. Work Areas:

- a. Information of a confidential nature shall be removed from public view (placed inside a desk or file) when the employee is away from his/her work area and another authorized employee is not available to assure security of the information.
- b. Information of a confidential nature shall be placed in locked files or other secure places when offices or work units are closed or left unattended.
- c. Information to be discarded, such as poor quality copies or purged file materials, containing individual information shall be shredded or otherwise destroyed to the extent that individuals cannot be identified.



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- d. Printers, copy machines, and other office equipment will be strategically positioned to reduce the amount of information that may be viewed by people entering the work area.

### 2. Information Exchange:

- a. Confidential personnel information obtained in the performance of duties shall not be disclosed to anyone without a business-related reason to know.
- b. Informal records of telephone conversations containing information of a confidential nature shall be shredded unless placed in official files.
- c. Conferences and informal conversations shall be held in a manner to avoid discussions of a confidential nature being overheard by others.
- d. All paper documents containing information of a confidential nature shall be sealed inside an envelope addressed to a specific office or individual and marked "CONFIDENTIAL" when mailing or sending to other individuals, programs or agencies having an official need for the information.
- e. All documents of a confidential nature transmitted by fax machine to agencies and individuals with an official need to know, shall use a cover page containing a confidentiality statement approved by the DHSS Office of General Counsel. Staff shall alert the receiver that the information is being transmitted via fax and request immediate retrieval and verification of receipt to the sender.
- f. All DHSS electronic mail messages should include a statement of confidentiality approved by the DHSS Office of General Counsel.
- g. Electronic mail communications shall not contain confidential individually identifiable information unless technology such as encryption is employed to secure the content of the electronic mail.



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### 3. Computers:

- a. Computer workstation screens shall be positioned to limit visualization by other employees or visitors.
- b. Employees shall protect their sign on and passwords to prevent use by anyone other than the authorized employee.
- c. Employees shall logout of the network when away from their desk for an extended period; for short periods of inactivity, password protected screen savers shall be activated on all workstations.
- d. Employees shall be familiar and comply with Chapter 24.2 and 24.5 of the Department's Administrative Manual relating to Information Technology Security and the acceptable use of Electronic Communications.

#### B. Penalties:

Breach of confidentiality or unauthorized destruction of confidential information/ records shall result in disciplinary actions. These actions may include dismissal, depending on the severity of the offense, and possible legal action.

Prepared By:

Approved By:

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Chief, Office of Human Resources

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Deputy Department Director